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Document Description: Petition to withdraw attorney or agent (SB83)

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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/766,397
Filing Date	January 23, 2004
First Named Inventor	Miles Blackwood
Art Unit	
Examiner Name	Euncha Cherry
Attorney Docket Number	PUKM5008

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
Please withdraw me as attorney or agent for the above identified patent application, and								
all the practitioners of record;								
the practitioners (with registration numbers) of record listed on the attached paper(s); or								
the practitioners of record associated with Customer Number:								
NOTE: The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.								
The reason(s) for this request are those described in 37 CFR:								
10.40(b)(1) 10.40(b)(2) 10.40(b)(3)								
10.40(c)(1)(i) 10.40(c)(1)(ii) 10.40(c)(1)(iii) 10.40(c)(1)(iv)								
10.40(c)(1)(v) 10.40(c)(1)(vi) 10.40(c)(2) 10.40(c)(3)								
10.40(c)(4) 10.40(c)(5) 10.40(c)(6) Please explain below:								
Certifications								
Check each box below that is factually correct. WARNING: If a box is left unchecked, the request will likely not be approved.								
We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment.								
2. We have delivered to the client or a duly authorized representative of the client all papers and property (including funds) to which the client is entitled.								
3. We have notified the client of any responses that may be due and the time frame within which the client must respond.								
Please provide an explanation, if necessary:								

This collection of information is required by 3T CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is govered by \$5 U.S. C. 122 and 3T CFR 1.11 and 1.14. This collection is estimated to take the Turnius to complete, including apthering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Arounders upgestions for reducing this burden, should be sent to the Christ Information Chiper, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO THIS ADDRESS. S

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Complete the following section only when the correspondence address will change. Changes of address will only be accepted to an inventor or an assignee that has properly made itself of record pursuant to 37 CFR 3.71.										
Change the correspondence address and direct all future correspondence to:  A										
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	ventor or usignee name Miles Blackwood									
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I am authorized to sign on behalf of myself and all withdrawing practitioners.										
Signature	/Rebecca E. Crandall/									
Name	Rebecca E	Rebecca E. Crandall					Registration No. 61,568			
Address Olive & Olive, P.A., P.O. Box 2049										
City Durham State NC				Т	Zip 27702 Cour		Count	ntry USA		
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NOTE: Withdrawal is effective when approved rather than when received.										

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